

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Warrior PAC

ADDRESS (number and street)

1048 Irvine Ave

#506

☐ Check if different than previously reported. (ACC)

Newport Beach

CA

92660

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00619445

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

☐ PRE-Election
Report for the:☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

☐ POST-Election
Report for the:☐ General (30G)☒ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

LA

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

San Luis, Robert, , ,

Type or Print Name of Treasurer

Signature of Treasurer

San Luis, Robert, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Warrior PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 11 / 29 / 2016

To:

 M M / D D / Y Y Y Y Y
 12 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2016		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	1880.81	
(c) Total Receipts (from Line 19)	60000.00	792700.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	61880.81	792700.00
7. Total Disbursements (from Line 31).....	57733.30	788552.49
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	4147.51	4147.51
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Warrior PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
11		29		2016

To:

M M	/	D D	/	Y Y Y Y Y Y
12		30		2016

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

60000.00

792600.00

(ii) Unitemized

0.00

100.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

60000.00

792700.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

60000.00

792700.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

60000.00

792700.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

60000.00

792700.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	1500.00	2394.79
(b) Other Federal Operating Expenditures	0.00	27655.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1500.00	30050.29
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	56233.30	749882.60
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	8619.60
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	57733.30	788552.49
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	56233.30	786157.70

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	60000.00	792700.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	60000.00	792700.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	27655.50
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	0.00	27655.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 11

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Warrior PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. San Luis, Robert, , ,

Mailing Address 1048 Irvine Ave
#506

City
Irvine

State
LA

Zip Code
70447

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 07 / 2016

Transaction ID : SA11AI.4226

Amount of Each Receipt this Period

60000.00

☐ Memo Item
Individual Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60000.00

60000.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 7 OF 11
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Warrior PAC				FEC IDENTIFICATION NUMBER ▼ C C00619445	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Digital Triumph			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 12 / 07 / 2016		
Mailing Address 1048 Irvine Avenue Suite 506			Amount 12842.36		
City Newport Beach	State CA	Zip Code 92660	Transaction ID : SE.4202		
Purpose of Expenditure Digital Advertising		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 12 / 07 / 2016		
Name of Federal Candidate: ANGELLE, SCOTT MR., , ,			Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: LA		
Calendar Year-To-Date Per Election for Office Sought 12842.36			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff		
Full Name of Payee Digital Triumph			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 12 / 07 / 2016		
Mailing Address 1048 Irvine Avenue Suite 506			Amount 12842.36		
City Newport Beach	State CA	Zip Code 92660	Transaction ID : SE.4204		
Purpose of Expenditure Digital Advertising		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 12 / 07 / 2016		
Name of Federal Candidate: HIGGINS, CAPTAIN CLAY, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: LA		
Calendar Year-To-Date Per Election for Office Sought 25684.72			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff		
(a) SUBTOTAL of Itemized Independent Expenditures			25684.72		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
San Luis, Robert, , , Signature			[Electronically Filed] Date M M / D D / Y Y Y Y Y Y 01 / 09 / 2017		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 8 OF 11
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Warrior PAC				FEC IDENTIFICATION NUMBER ▼ C C00619445	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Digital Triumph			<input type="checkbox"/> Memo Item		
Mailing Address 1048 Irvine Avenue Suite 506			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 12 / 08 / 2016		
City Newport Beach		State CA	Zip Code 92660		
Purpose of Expenditure Automated Calls		Category/ Type 004		Amount 4216.11	
Name of Federal Candidate: KENNEDY, JOHN NEELY, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff		
Full Name of Payee Digital Triumph			<input type="checkbox"/> Memo Item		
Mailing Address 1048 Irvine Avenue Suite 506			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 12 / 08 / 2016		
City Newport Beach		State CA	Zip Code 92660		
Purpose of Expenditure Automated Calls		Category/ Type 004		Amount 4216.11	
Name of Federal Candidate: HIGGINS, CAPTAIN CLAY, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff		
(a) SUBTOTAL of Itemized Independent Expenditures ▶ 8432.22 (a) SUBTOTAL of Unitemized Independent Expenditures ▶ (a) TOTAL Independent Expenditures ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
San Luis, Robert, , , Signature			Date M M / D D / Y Y Y Y Y Y 01 / 09 / 2017		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 9 OF 11
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Warrior PAC				FEC IDENTIFICATION NUMBER ▼ C C00619445	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Digital Triumph			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 12 / 08 / 2016		
Mailing Address 1048 Irvine Avenue Suite 506			Amount 8432.22		
City Newport Beach	State CA	Zip Code 92660	Transaction ID : SE.4211		
Purpose of Expenditure Automated Calls		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 12 / 08 / 2016		
Name of Federal Candidate: ANGELLE, SCOTT MR., , ,			Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: LA		
Calendar Year-To-Date Per Election for Office Sought 38333.05			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff		
Full Name of Payee Digital Triumph			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 12 / 09 / 2016		
Mailing Address 1048 Irvine Avenue Suite 506			Amount 6842.07		
City Newport Beach	State CA	Zip Code 92660	Transaction ID : SE.4212		
Purpose of Expenditure Digital Advertising		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 12 / 09 / 2016		
Name of Federal Candidate: ANGELLE, SCOTT MR., , ,			Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: LA		
Calendar Year-To-Date Per Election for Office Sought 45175.12			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff		
(a) SUBTOTAL of Itemized Independent Expenditures			15274.29		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
San Luis, Robert, , , Signature			Date M M / D D / Y Y Y Y Y Y 01 / 09 / 2017		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 10 OF 11
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Warrior PAC				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00619445 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item Digital Triumph				Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 09 / 2016	
Mailing Address 1048 Irvine Avenue Suite 506				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">6842.07</div>	
City Newport Beach		State CA	Zip Code 92660	Transaction ID : SE.4213 Date of Disbursement or Obligation MM / DD / YYYY 12 / 09 / 2016	
Purpose of Expenditure Digital Advertising			Category/ Type 004		
Name of Federal Candidate: HIGGINS, CAPTAIN CLAY, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: LA	
Calendar Year-To-Date Per Election for Office Sought 52017.19				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	
Full Name of Payee <input type="checkbox"/> Memo Item				Date of Public Distribution/Dissemination	
Mailing Address				Amount	
City		State	Zip Code	Date of Disbursement or Obligation	
Purpose of Expenditure			Category/ Type 	MM / DD / YYYY	
Name of Federal Candidate:				Office Sought: <input type="checkbox"/> House District: _____	
				<input type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	
				<input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div> (a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditures (a) TOTAL Independent Expenditures </div> <div style="text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">6842.07</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">56233.30</div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
San Luis, Robert, , , _____ Signature				Date MM / DD / YYYY 01 / 09 / 2017	

[Electronically Filed]

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 11 OF 11

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Warrior PAC**A. Full Name (Last, First, Middle Initial) Transaction ID : H4.4224**☐ Memo Item**GATORPAC**

Mailing Address 680 Windermere Crossing West

City
MadisonvilleState
LAZip Code
70447Purpose of Disbursement:
Data Acquisition

Activity or Event Identifier:

Administrative

003

Category/
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2394.79

Date

M M / D D / Y Y Y Y Y Y
12 07 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

0.00

1500.00

1500.00

B. Full Name (Last, First, Middle Initial)☐ Memo Item

Mailing Address

City

State

Zip Code

Purpose of Disbursement:

Activity or Event Identifier:

Category/
Type

Allocated Activity or Event:

☐ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M M / D D / Y Y Y Y Y Y

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

C. Full Name (Last, First, Middle Initial)☐ Memo Item

Mailing Address

City

State

Zip Code

Purpose of Disbursement:

Activity or Event Identifier:

Category/
Type

Allocated Activity or Event:

☐ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

M M / D D / Y Y Y Y Y Y

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

0.00

1500.00

1500.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

0.00

1500.00

1500.00